CHARGE OF DISCRIMINATION	AGENCY	CHARGE NUMBER
This form is affected by the Privacy Act of 1974; See Privacy Act Statement becompleting this form.	efore FEPA	221400620
	X EEOC	221A00639
Ohio Civil Rights Commission State or local Agency, if any	a	ind EEOC
NAME (Indicate Mr., Ms., Mrs.)	HOME TELEP	HONE (Include Area Code)
Ms. Andrea L. Ngo	l l) 921-5152
1697 Atson Lane, Cincinnati, OH 45205		DATE OF BIRT
NAMED IS THE EMPLOYER. LABOR ORGANIZATION EMPLOYMENT AG	ENCY APPRENTI	04/20/193 CESHIP COMMITTEE
STATE OR LOCAL GOVERNMENT AGENCY WHO DISCRIMINATED AGAIN. NAME NUMBER OF EMPLOYEE	ST ME (If more th.	an one list below.) EPHONE(Include Area Code
CINCINNATI, CITY OF Cat D (501	. 1	513) 557-7000
TITT, STATE AND ZIP CODE		COUNTY
Metropolitan Sewer District, 1081 Woodrow, Cinci	nnati, OH 4º	5204 061 MBER (Include Area Code)
STREET ADDRESS		
STATE AND ZIF CODE		COUNTY
CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es))		IMINATION TOOK PLACE
RETALIATION X AGE DISABILITY OTHER (Specifical)	l l	CATEST
RETALIATION X AGE DISABILITY OTHER (Specify)		999 07/11/2000 Duing action
I. I am being given different terms and conditions of employment in regards to plants in my work area, denial of a printer replacement, not repairing my computer, assignment of additional work, and lowered Performance Appraisal (June 2, 2000). I was also given a written reprimand on November 4, 1999, and marked as absent without leave (AWL) on May 30, 2000 See altached) II. Tara Williams (Chemist I, Black female American, about age 41), gave me a written reprimand on November 4, 1999, and charged with insubordination for failure to comply with a direct order to me remove my plants. Mike Nalley (Computer Specialist, White male American, about age 33) told me my computer was going to be replaced. Ms. Williams gave me a lowered appraisal for failure to follow directives. Beverly Head (Superintendent, Black female American, about age 50) told me she would see if my AWL was 2bis corrected or not and that it does take time 1		
violation of the Age Discrimination in Emplo	oyment Act.	
ocal Agency, if any. I will advise the agencies if I change my		
The state of the s		ove charge and that information and belief.
declare under penalty of perjury that the foregoing is true SIGNATURE OF COM Andia X.		
SUBSCRIBED AND (Wonth, day and year)	SWORN TO BEFOR	IE ME THIS DATE
Charging Party (Signature) (UUSIS) NO. FORM 5 (Rev. 06/99)	ro //Nin	1 Aneding